

JOB DESCRIPTION

Instructions: Complete all sections except No. 11. Refer to Guidelines for Preparing Job Descriptions for instructions on completing specific items.

FOR DER USE ONLY

Vacancy No. _____

City Service _____ Finance _____
Commission _____ Committee _____

Fire & Police _____ Commo _____
Commission _____

1. Date Prepared/ Revised:	2. Present Incumbent:	Is incumbent underfilling position? YES _____ NO _____ If yes, indicate underfill title and pay range in box 10.			
3. Date Filled:	4. Previous Incumbent:				
5. Department:		Bureau: Division:	Unit: Section:		
6. Work Location:		Telephone: Email:	Work Schedule. Hours: Days:		
7. Represented by a Union? Yes _____ No _____		8. Bargaining Unit:	9. FLSA Status: Exempt _____ Non exempt _____		
10.	Official Title:		Pay Range	Job Code	EEO Code
	Underfill Title (if applicable):				
	Requested Title (if applicable):				
	Recommended Title (<u>DER Use Only</u>):	Approved by: _____ Date: _____			

11. BASIC FUNCTION OF POSITION:

12. DESCRIPTION OF JOB (Check if description applies to ___ Official Title or ___ Underfill Title):

A. ESSENTIAL FUNCTIONS/Duties and Responsibilities : (Refer to the Guidelines for Preparing Job Descriptions for instructions on determining Essential Functions.)

12. Description of Job (Continued)

B. OTHER FUNCTIONS

C. NAME AND TITLE OF IMMEDIATE SUPERVISOR: _____

D. **SUPERVISION RECEIVED:** (Describe the extent to which work assignments and methods are outlined, reviewed, and approved by this position's supervisor.)

E. **SUPERVISION EXERCISED:**

_____ Total number of employees for whom responsible, either directly or indirectly.

Direct Supervision. List the number and titles of personnel directly supervised. Specify the kind and extent of supervision exercised by indicating one or more of the following: (a) assign duties; (b) outline methods; (c) direct work in process; (d) check or inspect completed work; (e) sign or approve work; (f) make hiring recommendations; (g) prepare performance appraisals; (h) take disciplinary action or effectively recommend such.

Instruction: After typing the number, title, and extent of supervision exercised, you can press the "Enter" or "Return" key to start a new line.

<u>Number</u>	<u>Title</u>	<u>Extent of Supervision Exercised</u> <i>(Select those that apply from list above)</i>

F. **MINIMUM QUALIFICATIONS REQUIRED:** (Indicate the MINIMUM qualifications required to enter the job.)

i. EDUCATION AND EXPERIENCE

ii. KNOWLEDGE, SKILLS AND ABILITIES

iii. CERTIFICATIONS, LICENSES, REGISTRATIONS

iv. OTHER REQUIREMENTS

G. PHYSICAL DEMANDS OF POSITION: (List the physical demands which are representative of those that must be met to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.)

H. ENVIRONMENTAL/WORKING CONDITIONS: (List the environmental/working conditions which are essential functions of the job, especially any unpleasant or dangerous conditions. Include scheduling considerations such as on-call for emergencies, rotating shift. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.) **Approximate Percentage of time performing field work:** _____%

I. EQUIPMENT USED: (List equipment which is representative of that which would be used to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.)

J. SUPPLEMENTARY INFORMATION: (Indicate any other information which further explains the importance, difficulty, or uniqueness of the position, such as its scope of responsibility related to finances, equipment, people, information, etc. Also indicate success factors such as personal characteristics that contribute to an individual's ability to perform well in the job, and any other special considerations.)

K. I believe that the statements made above in describing this job are complete and accurate:

Signature of Department Head or Designated Representative